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10/19/2005 CCOFER 00000002 162500 09891945

01 FC:1801 790.00 DA
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PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000.

Application or Docket Number

D9891945

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS	<i>19</i>	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	<i>19</i> minus 20 =	*
INDEPENDENT CLAIMS	<i>2</i> minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

SMALL ENTITY
TYPE OR OTHER THAN
SMALL ENTITY

RATE	FEES	RATE	FEES
BASIC FEE	355.00	OR BASIC FEE	710.00
X\$ 9=		OR X\$18=	
X40=		OR X80=	
+135=		OR +270=	
TOTAL		OR TOTAL	<i>710</i>

OTHER THAN
SMALL ENTITY

RATE	ADDI-TIONAL FEE	RATE	ADDI-TIONAL FEE
X\$ 9=		OR X\$18=	
X40=		OR X80=	
+135=		OR +270=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

CLAIMS AS AMENDED - PART II

10-14-05

(Column 1)

(Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	<i>19</i>	Minus	<i>20</i>
Independent	<i>2</i>	Minus	<i>3</i>	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>	

SMALL ENTITY OR OTHER THAN
SMALL ENTITY

RATE	ADDI-TIONAL FEE	RATE	ADDI-TIONAL FEE
X\$ 9=		OR X\$18=	
X40=		OR X80=	
+135=		OR +270=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	<i>..</i>	Minus	<i>..</i>
Independent	<i>..</i>	Minus	<i>..</i>	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>	

RATE	ADDI-TIONAL FEE	RATE	ADDI-TIONAL FEE
X\$ 9=		OR X\$18=	
X40=		OR X80=	
+135=		OR +270=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	<i>..</i>	Minus	<i>..</i>
Independent	<i>..</i>	Minus	<i>..</i>	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>	

RATE	ADDI-TIONAL FEE	RATE	ADDI-TIONAL FEE
X\$ 9=		OR X\$18=	
X40=		OR X80=	
+135=		OR +270=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.